

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90217 001 ****61.25

DOCUMENT # 719453

1. Entity Name

FLORIDA SUNCOAST CHAPTER OF THE 99'S, INC.



Principal Place of Business

**8719 SUNLIT COVE DR NE
SAINT PETERSBURG FL 33702
US**

Mailing Address

**8719 SUNLIT COVE DR NE
SAINT PETERSBURG FL 33702
US**

2. Principal Place of Business

15 N. Meteor Ave

3. Mailing Address

15 N. Meteor Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater, FL

City & State

Clearwater, FL

Zip
33765

Country
US

Zip
33765

Country
US

4. FEI Number **59-1594346**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BURNS, ROBYN J
8719 SUNLIT COVE DRIVE NE
SAINT PETERSBURG FL 33702**

7. Name and Address of New Registered Agent

Name **Denise L. Rosenberger**

Street Address (P.O. Box Number is Not Acceptable)

15 N. Meteor Ave

City

Clearwater

FL

Zip Code

33765

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Denise L. Rosenberger, Denise L. Rosenberger, Treasurer 2/7/03

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **SD** ☐ Delete
NAME **WRIGHT, NANCY**
STREET ADDRESS **122 HIGHLAND ROAD**
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **CD** ☐ Delete
NAME **GREIN, MARIE**
STREET ADDRESS **2290 TERRACE DRIVE N**
CITY-ST-ZIP **CLEARWATER FL 33765**

TITLE **TD** ☒ Delete
NAME **BURNS, ROBYN**
STREET ADDRESS **P.O. BOX 17103**
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **VCD** ☐ Delete
NAME **YENINAS, BARBARA**
STREET ADDRESS **2023 DOCKSIDE DRIVE**
CITY-ST-ZIP **LUTZ FL 33549**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TREASURER** ☒ Change ☐ Addition
NAME **Denise L. Rosenberger**
STREET ADDRESS **15 N. Meteor Ave**
CITY-ST-ZIP **Clearwater, FL 33765**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Denise L. Rosenberger

2/7/03 727-449-0014

CR2E037 (10/02)